

DEPARTMENT OF HEALTH

DIVISION OF EPIDEMIOLOGY, ENVIRONMENTAL AND OCCUPATIONAL HEALTH PO BOX 369
TRENTON, N.J. 08625-0369

CHRIS CHRISTIE Governor

www.nj.gov/health

KIM GUADAGNO
Lt. Governor

MARY E. O'DOWD, M.P.H.
Commissioner

To: New Jersey First Responders

From: Shereen Semple, MS, Epidemiologist

Prathit Kulkarni, M.D., Epidemic Intelligence Service Officer (CDC)

Infectious and Zoonotic Disease Program

Nancy Kelly-Goodstein, MAS

Office of Emergency Medical Services New Jersey Department of Health (NJDOH)

Date: August 11, 2014

Subject: Infection Prevention and Control Guidelines for Emergency Medical Service

Personnel Regarding Care and Transport of Patients with Suspected Ebola Virus

Disease (EVD)

On August 1, 2014, the CDC released the following guideline: "Infection Prevention and Control Recommendations for Hospitalized Patients with Known or Suspected Ebola Hemorrhagic Fever in U.S. Hospitals". This document lists emergency medical service personnel amongst the range of healthcare providers (http://www.cdc.gov/vhf/ebola/hcp/infection-prevention-and-control-recommendations.html). As more information becomes available, these recommendations will be re-evaluated and updated as needed.

When called to transport a person with fever and/or flu-like symptoms, please ask if the person had travel to West Africa within the past 3 weeks. If the person answers yes or an answer cannot be obtained, refer to the following recommendations:

For suspected or confirmed cases of Ebola virus disease (EVD), the following precautions are recommended:

- Standard
- Contact
- Droplet

When evaluating or transporting a patient with suspected or confirmed EVD, the following minimum personal protective equipment (PPE) should be used:

- Gloves
- Gown (fluid-resistant or impermeable)
- Eye protection (goggles or face shield)
- Facemask

Additional PPE may be required in certain situations (e.g., copious amounts of blood, other body fluids, vomit, or feces present in the environment). In these cases, double gloving, disposable shoe covers, and leg coverings may also be required.

When performing an intubation, nebulizer treatment or any other procedure that may result in the production of aerosolized body fluids, respiratory protection that is at least as protective as a NIOSH-certified fit-tested N95 filtering facepiece respirator should be used.

<u>Patient care equipment:</u> Dedicated medical equipment (preferably disposable) should be used for the provision of patient care. All non-dedicated, non-disposable medical equipment used for patient care should be cleaned and disinfected according to manufacturer's instructions before subsequent use.

<u>Patient care considerations:</u> Limit procedures to only those which are absolutely necessary prior to arrival at the hospital (e.g., limit the use of needles and minimize procedures as safely as possible). Hand hygiene should be performed frequently, including before and after all patient contact, contact with potentially infectious material, and before putting on and upon removal of PPE, including gloves.

<u>Patient transport into hospital:</u> Movement of suspect EVD patients into hospital or healthcare facilities should be restricted to entrances away from public waiting areas. Suspect cases should not be moved through, or temporarily left in, waiting rooms.

Environmental infection control: Diligent environmental cleaning and disinfection and safe handling of potentially contaminated materials is paramount, as blood, sweat, emesis, feces, and other body secretions represent potentially infectious materials. Persons performing environmental cleaning and disinfection should wear recommended PPE (described above). Follow standard procedures, per hospital policy and manufacturers' instructions, for cleaning and/or disinfection of: Environmental surfaces and equipment, textiles and laundry, and food utensils and dishware. Guidelines for environmental infection control in health-care facilities are available at: http://www.cdc.gov/hicpac/pdf/guidelines/eic_in_hcf_03.pdf.

For any questions regarding these guidelines or other recommendations specific to EMS, please contact the NJDOH Office of Emergency Medical Services at 609-633-7777 or email at ems@doh.state.nj.us. For questions regarding recommendations pertaining to Ebola Virus Disease, please contact the NJDOH Communicable Disease Service at 609-826-5964, Monday through Friday 8:00 AM - 5:00 PM.

Reporting Reminder for Healthcare Providers:

As a reminder, confirmed or suspect cases of any viral hemorrhagic fever, including EVD, should be reported immediately to the local health department where the patient resides. If patient residence is unknown, report to your own local health department. Local health departments are available 24/7. Contact information for local health departments during business hours can be found at: www.localhealth.nj.gov. Contact information for local health departments after business hours or on weekends can be found at: https://nj.gov/health/lh/documents/lhd after hours emerg contact numbers.pdf.

If local health department personnel are unavailable, healthcare providers should report the case to the NJDOH, Communicable Disease Service (CDS) at 609-826-5964, Monday through Friday 8:00 AM - 5:00 PM. On weekends, evenings and holidays, the CDS can be reached at (609) 392-2020.

Reporting Reminder for Local Health Departments:

As a reminder, local health departments that receive notification of a confirmed or suspect case of any viral hemorrhagic fever, including EVD, should immediately contact the NJDOH CDS at 609-826-5964, Monday through Friday 8:00 AM - 5:00 PM. On weekends, evenings and holidays, the CDS can be reached at (609) 392-2020.

Additional information on viral hemorrhagic fevers can be found on the NJDOH website at http://www.state.nj.us/health/cd/vhf/index.shtml.